The tired patient

"I’m so tired all the time. What can I take to boost my energy levels?"

A common question posed to staff in a community clinic setting, but often a particularly difficult one to answer.

Fatigue, chronic fatigue and the Chronic Fatigue Syndrome

Fatigue is a common complaint amongst patients who come to the clinic seeking help and advice. Fatigue, which is also commonly referred to as tiredness (although these terms do not actually have identical meanings), refers to the sensation of exhaustion during or after usual activities, or even inadequate energy to begin these activities in the first place. In its most severe form, ongoing fatigue can heavily impact the daily activities of a patient and significantly reduce their quality of life.

Fatigue has multiple causes and can be characterised as follows:
- Recent fatigue refers to symptoms lasting less than one month
- Prolonged fatigue refers to symptoms lasting for more than one month
- Chronic fatigue refers to symptoms lasting over 6 months

One of the most severe manifestations of fatigue is the Chronic Fatigue Syndrome (CFS). It is important to clarify that a patient with a symptom of chronic fatigue does not necessarily suffer from CFS, although this condition is also characterised by ongoing fatigue.

CFS is actually a relatively uncommon cause of chronic fatigue. In order for a patient to be diagnosed with the syndrome, they must present with unexplained, persistent or relapsing fatigue as well as a number of specific associated symptoms.

usually patients with CFS will not be those with long histories of fatigue or problems such as backache and chronic headache. Often CFS symptoms start relatively suddenly and after a minor infection. After the infection resolves, the patient is left with extreme fatigue as well as symptoms such as difficulty sleeping and concentrating. The patient’s joints may ache, but there is no sign of inflammation or swelling, and their muscles get tired easily, although their strength is perfectly normal.

No one really knows what actually causes CFS. Other than their described feelings of extreme exhaustion and pain, CFS sufferers usually appear quite healthy, and quite often their complaints are disregarded as “hyperochondria” or psychiatric problems. A lot of effort has gone into investigating the possible causes of the syndrome, but in most cases where links have been found, they have still to be proven absolutely.

Chronic infection with Epstein Barr virus, coxsackie B virus and a number of other viral infections has been suggested, but investigations in this area have proven inconclusive. It is also possible that an immune system dysfunction may be responsible, as there has been some evidence showing differences in immune markers in CFS sufferers as compared to the normal population. Then again, other studies have found no differences and the link is inconclusive. Several abnormalities of metabolism and hormonal functioning have also been described in CFS, but their role in the causation of the symptoms is unclear.

Other than CFS, fatigue can be a symptom of a number of other underlying conditions. In the majority of patients who complain of chronic fatigue, a medical or psychiatric problem is likely to be behind the problem.

Psychiatric problems, particularly depression, are extremely common in fatigued patients and are estimated to be present in up to 80% of patients complaining of ongoing fatigue. What has not been determined is whether fatigue is the result of a depressed mental state or whether chronic fatigue actually causes patients to lapse into depression. This makes management of fatigue in depressed patients especially complicated.

Fibromyalgia (FM), another poorly understood illness, may also be responsible for fatigue, and the symptoms of FM may be so similar to CFS, that it can be difficult to distinguish between the two. Both conditions are characterised by pain and tiredness, but fibromyalgia can often be traced back to a physical injury or emotional trauma which triggered the symptoms.

Prescription medicines may be an important factor in causing fatigue, and patients taking sleeping tablets, muscle relaxants, antidepressants or strong pain medications may report fatigue as a side effect of their prescribed medication.
What can we do?

Clearly, when patients present in a clinic to ask what they can take for their tiredness, the answer is never simple. Getting details about a patient’s history is extremely important if they are going to be managed appropriately, and to do this, you have to ask the right questions.

If a patient says they are always tired, ask them to describe in more detail exactly what they feel. Check whether they are only tired after physical or mental effort and quickly feel better after some rest, or whether their fatigue is so extreme that they are not even able to carry out basic everyday tasks.

Check if the patient is on any medication – this will help not only to identify whether the fatigue is perhaps a side effect of treatment, but also to assess other conditions from which the patient might be suffering. Also question the patient as to their alcohol intake, as well as whether they use any medicines or supplements other than prescription medications.

Find out about their sleeping patterns. Poor sleep over prolonged periods can have a major impact on physical and mental functioning as well as overall health, and the answer is not always a sleeping tablet.

Ten basic rules on which to advise patients looking for a good night’s sleep:

1. Sleep only as much as you need to feel rested – this can be tricky, as many people who have poor quality sleep because of other factors may often wake up feeling tired, even after a prolonged sleep period.
2. Keep a regular sleep schedule. This entails setting and maintaining a regular bed-time and wake-up time. This helps the body establish rhythms and regular sleeping patterns.
3. Avoid forcing sleep.
4. Exercise regularly, for at least 20 minutes, preferably 4 to 5 hours before bedtime.
5. Avoid cafffeinated beverages after lunch. Not only does the stimulant effect of caffeine impair sleep patterns, but its dehydrating effects can cause a patient to have to wake up to urinate frequently during the night.
6. Avoid alcohol near bedtime. Although alcohol may initially help a person to relax at bedtime and to fall asleep initially, it has been shown to disturb sleep later during the night. Like caffeine, it also has a dehydrating effect.
7. Avoid smoking, especially in the evening. Nicotine in cigarettes is also a stimulant and can also affect sleep.
8. Do not go to bed hungry.
9. Adjust the bedroom environment.

Ideally, the room should be as dark and quiet as possible, and at a comfortable temperature.

10. Deal with worries before bedtime.

Taking tonics and supplements

An easy solution to the problems of a fatigued patient in the clinic is to recommend one of the many tonics or vitamin supplements available. However, if the cause of the patient’s fatigue lies deeper than just poor nutrition, supplements may be of limited value, and the effectiveness of supplements in severe fatigue states such as CFS has never been proven in controlled studies.

The use of multivitamin supplements and tonics, and whether it is necessary for most patients to take them, can be, and has been, debated ad nauseum. In theory, if a patient follows a healthy, balanced diet, there should be no need for additional supplements, but research indicates that very few patients do follow a healthy balanced diet, and they may be at risk of suffering from a deficiency of some kind.

Tonics are preparations meant to promote overall health and prevent disease. Most tonics available can be described as gentle stimulant preparations aimed to relieve mental and physical fatigue in the short term. Be aware that tonics are usually combinations of a number of ingredients, many of which can potentially have side effects.

Many tonics simply contain a mixture of vitamins, usually B vitamins, although a number of products also include amino acids, caffeine and herbal additives such as guarana, ginseng, gingko biloba and cola nut.

Vitamin B complex is often recommended to tired and stressed patients. Many of the B vitamins are important in the processes required to release energy from carbohydrates, protein and fats in the diet, so naturally it follows that they may be beneficial to patients lacking energy and having a poor, unbalanced lifestyle and diet. The B vitamins are water soluble and are not prone to accumulation in the body, and have few if any toxic effects even if given in large doses, which is why they are often included in such high amounts in multivitamin supplements and tonics.

Caffeine is the well-known stimulant found in coffee and many teas. Consumption of caffeinated beverages seems to prevent a decline in alertness and cognitive capacity when consumed throughout the day. Caffeine can improve mental performance and alertness following prolonged sleep deprivation. Combining caffeine with glucose as an “energy drink” also has been shown to improve mental performance better than caffeine or glucose alone. It has also been shown to decrease perceived levels of exertion, which enables athletes to feel less tired and increase their performance. Caffeine seems to enhance muscle metabolism and increases time to exhaustion and oxygen deficit, which may lead to better performance.

Caffeine may also be found in some herbal remedies. Guarana, also known as Brazilian Cocoa, is often included in preparations as a natural stimulant. Guara-contains 3.6% to 5.8% caffeine (compared to 1% to 2% in coffee). Cola nut also contains caffeine (1% to 2.5%) which is responsible for the majority of its stimulant effects.

Tonics containing caffeine and caffeine-containing herbs may have their place for the odd “pick me up” if a patient feels tired on occasion, but should probably not be recommended in other instances. Caffeine can cause headaches, insomnia, nervousness, restlessness, gastric irritation, nausea, vomiting, quic-kened heart beat, fast breathing, tremors, delirium and convulsions if taken in large quantities.

Ginkgo biloba leaf extract has been shown to modestly improve memory and speed of thought processing. Some evidence suggests a combination of Panax ginseng and gingko is effective for enhancing memory and that the combination might be more effective than either product alone. Gingko is not useful for physical fatigue symptoms.

In summary, fatigue is a common complaint. Clearly, tonics and supplements may have benefits for patients who have mild symptoms of fatigue, but for those where extreme tiredness is not merely a manifestation of being over-worked and under-rested, they may not offer a permanent solution.

Severe fatigue states will usually require more involved medical evaluation and treatment than one we can offer with over the counter medicines. The importance for us and our patients is to be able to differentiate genuine severe and chronic fatigue from short-lived, temporary fatigue and instead of merely suggesting a supplement, suggest the patient consult their doctor.

References:

1. Merck Manual online – Home Edition
3. Up to Date Medical Information Database: Version 15.1, 2007